

P21000018348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

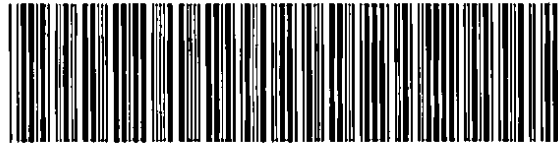
(Document Number)

Certified Copies _____

Certificates of Status _____

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03/01/21--01007--003 **70.00

2021 MAR -1 PM 2:15

2021 MAR -1 PM 1:53

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Mocha Cyan Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Dina Timmoney
Name (Printed or typed)

18298 Creekside Preserve Loop #201
Address

Fort Myers, FL 33908
City, State & Zip

239-850-1180
Daytime Telephone number

accounting@stradaitaliausa.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Mocha Cyan Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
18298 Creekside Preserve Loop #201
Fort Myers, FL 33908

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dina Timmoney President Name and Title: _____

Address 18298 Creekside Preserve Loop #201 Address: _____
Fort Myers, FL 33908

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Dina Timmoney
Address: 18298 Creekside Preserve Loop #201
Fort Myers, FL 33908

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Dina Timmoney
Address: 18298 Creekside Preserve Loop #201
Fort Myers, FL 33908


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/24/2021 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:

 02 / 25 / 2021
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 02 / 25 / 2021
Required Signature/Incorporator Date